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ABSTRACT

The elderly have generally been portrayed as needy recipients of services; only recently has attention been paid to their contributory role. To explore the nature and characteristics of helping behavior among urban elderly, 117 residents of senior citizens' housing sites in Detroit completed the Altruism Scale for the Elderly and a second measure consisting of a semantic differential scale and open-ended items designed to elicit information about their helping patterns. Analysis of results showed that 67 percent of the respondents reported helping very much, with older respondents reporting significantly less helping behavior. All felt that helping others was an important activity in their lives. The person helped most frequently was a friend, neighbor, or relative. Most help was in the form of a service. Types of help spanned a broad range from heroic rescue to small daily courtesies. Most respondents referred to enduring forms of help such as caring for an ill relative, and indicated that they considered the rewards of helping to be intrinsic in nature. The findings provide a strong indication for the importance of altruistic motives for older persons and raise questions about the universal applicability of an exchange model of helping for elderly providers of help. (JAC)

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THE ELDERLY HELPER

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Objectives of the Study

This study represents an initial effort to describe and explore the nature and characteristics of helping behaviors among urban elderly residing in senior citizens' housing sites.

In gerontological studies the elderly have generally been portrayed as needy recipients of services. Attention has only recently been directed at contributory roles of older persons. Such accumulating evidence comes largely from studies where help provided by the elderly was incidentally observed and noted.

In order to seriously investigate helping, its antecedents and outcomes among older adults, we must be able to characterize the nature and characteristics of helping provided by the aged. Accordingly, the present study explored the personal meaning, importance and salience of diverse forms of helping to the elderly helper. Self reported frequency of exhibiting diverse types of helping behavior was determined. Motives for helping were considered in terms of perceived rewards of helping and the nature of special helping acts noted by the elderly. Age and sex differences in reporting diverse helping acts were also studied.

Background

There are many instances and examples of older persons actively taking the role of helpers rather than being recipients. Within the family context, older persons generally serve as providers of financial assistance to young adult children (Troll, Miller and Atchley, 1975), and according to Cantor (1975), 75% of minority elderly report that they provide help to their children. The Harris (1976) poll revealed that elderly persons report that they help their families by providing repair work, housekeeping, nursing care, money and gifts to family members. Community surveys of older persons have also provided evidence that when three-generational living arrangements prevail, generally the grandparent generation takes the role of caregiver to children and/or grandchildren who are experiencing life crises such as divorce or widowhood (Kahana, 1975). During periods of crisis, even when they are not residing with their children, half of the elderly persons in a national sample reported giving their grandchildren some form of assistance (Shanas, 1967). Thus, results of prior research indicate that the extended family may be an important domain for helping by the elderly.

A second ecological domain for the provision of help by the retired elderly may be found within the non-familial residential context. The importance of the residential milieu in the life of the elderly is especially apparent when we realize that following retirement, 80-90% of the older persons's time may be spent there (Montgomery,1972). Given the loss of earlier roles--marital, occupational, and the like--combined with the amount of time spent at home, it is probably no surprise that relationships with neighbors and friends increase in importance with age. Furthermore, with increased age there is an increase in needs for help, and an increased vulnerability to victimization--usually combined with the desire to continue an autonomous existence within the community. Helping of one's neighbors may also fulfill the need to engage in meaningful activities, and to be useful. Indeed, informal help-giving by elderly neighbors may fill social vacuums which result from lack of sufficient formal services. Hence, neighborly helping within the residential domain may have great importance in the life of the elderly.

Indeed, Cantor (1975) found that elderly neighbors tend to help each other with many activities such as daily chores, with the most important category of activities among neighbors being crisis or emergency intervention. In addition, Rosow (1967) found that for the elderly poor with no living relatives, help from neighbors was apparently the primary way of coping with illness.

There is also growing evidence indicating that the elderly are also inclined to provide services to the wider community through such activities as the performance of volunteer and charity work (Payne, 1977). Accordingly, the 1976 Harris Poll reports that 22% of elderly engage in organized volunteer work (Harris, 1975).

METHOD

Sample

One hundred seventeen elderly persons were randomly sampled from five residences for senior citizens in the Detroit metropolitan area, with the restriction that respondents be physically mobile, and not house-bound. The range of ages was from 65 to 101, with a mean of 75.6. Slightly over two-thirds were female, 8% were black, and diverse religious and ethnic groups were represented.

The religious preference of 44% of the respondents was Catholic, 24% were Protestant and 22% Jewish. The largest single group of respondents was born outside of the United States, followed by native Michiganians and natives of other Midwestern states. Three-fourths of the sample had 12 years of education or less, whereas approximately one-fourth had at least some college. The most prevalent pre-retirement occupation was proprietorship of a small business (36.8%), followed by homemaker (15.4%). An additional 20% were executives, professionals, semiprofessionals or proprietors of medium or large businesses.

These sample characteristics are generally consistent with those found in previous studies of elderly residents of housing sites (Lawton, 1980). Thus, generalizations about helping by older persons based on the present data set were thought likely to portray helping patterns of urban U.S. elderly living in senior citizens' housing developments.

Measures

The survey instrument was comprised of several measures, which were designed to obtain data regarding environmental and situational antecedents of helping, as well as hypothesized psychosocial outcomes (self-esteem, morale, and social integration). Because of the centrality of helping in

this study, several measures of this variable were used. For purposes of the current presentation, we will discuss findings on two measures. One, the Altruism Scale for the Elderly (ASE) was adapted from a measure designed for use with younger persons (Rushton, Chrisjohn and Fekken, 1981). Cronbach's alpha for this scale was .84. This scale, the ASE, asked about the presence/absence and frequency of occurrences of a diversity of helping responses. A second measure consisted of a number of semantic differential and open-ended items regarding helping--and its rewards, obstacles, and costs (Midlarsky and Kahana, 1983a). The survey instrument was extensively pretested prior to its use in the present study, and took approximately one hour to administer.

RESULTS

The Importance and Nature of Helping

When asked how much they had helped others in the past year, 67% of respondents reported helping very much or much; only 7% reported that they did not help at all. Amounts helped also varied with age, with older respondents reporting significantly less helping behavior than younger respondents. Amount of self-reported helping did not significantly vary with sex or place of residence.

The preponderance of respondents in this survey (81%) reported that they spent at least some of their time helping others, with 18.8% reporting that they spent little or very little time in helping activities. Concommitantly, all of the respondents (100%) in this survey felt that helping others is an important activity in their lives, and none felt that it is not important. Most (60%) reported that helping is very important, 31% deemed it important, and for only 8.5% was it described as somewhat important.

The largest group of respondents, 43%, reported that helping in the last year was about the same that it had been throughout their lives. The next largest group, 39%, stated that they used to help less.

Who is Being Helped?

The person helped most frequently, in descending order, was a friend (26%), neighbor (23%), child (14%), spouse (3%), sibling (5%), relative (5%), "other" (3%), or parent (1%). However, men and women in the sample responded somewhat differently to this question ($X^2 = 16,89$, 8 df, $p < .03$). That is, men most frequently cited a spouse (30%, followed by a friend (24%) as recipient, while most women cited a neighbor (31%), followed by a friend (30%), with spouse (7%) cited very infrequently. It is, of course,

possible that one determinant of the difference is that fewer women than men have living spouses. Confirming the importance of the residential context for assistance provided to neighbors, the highest percentage of assistance provided was to neighbors (88%), closely followed by friends (85%) and then family (71%). We must note here that there is a likely overlap between friends and neighbors in a homogeneous residential context. Thus, it is likely that as residents become more socially integrated, many of their neighbors may also be characterized as friends.

What are the Kinds of Help Provided?

Respondents were asked about the three types of helping in which they engaged most frequently. Responses were then categorized in accordance with Adams' (1968) typology as provision of tangibles, intangibles, service, or a combination of intangibles or services. In all cases, the largest group provided a service, followed by intangibles, tangibles, and a combination of intangibles and service. Over 32% of the respondents said that the types of help given now were similar to help given in earlier life, in contrast to 21.7% saying it was somewhat similar and 45.3% for whom it was different or very different.

Responses to the Altruism Scale for the Elderly (ASE) were examined to determine the percentages and frequencies of responses regarding diverse types of helping. Results indicated that the three helping acts in which the largest percentages of respondents engaged once or more than once during the year were holding the elevator for someone (91.4%), giving emotional support (90.5%), and donating money to charity (89%). The helping acts engaged in by the smallest percentages of respondents were donating blood (2.6%), lending a stranger an item of value (16.3%), and helping an acquaintance

move households (27.4%).

Responses to some of the ASE items significantly varied with age groups; in each case, the pattern of results suggested that individuals in the 70-80 age range were most helpful. Three items on the ASE were also responded to significantly differently by males and females. Females reported significantly more frequently than males that they looked in on someone sick, looked in on a friend and neighbor, and gave emotional support to a family member, neighbor or friend.

Respondents were also asked about the degree to which their helping was planned in advance, or provided on the spur of the moment. The single largest group (13.3%) said that when they helped it was on the spur of the moment, and the next largest (13.2%) responded that they sometimes plan ahead.

Special Acts of Helping

Each respondent was asked to describe a helping act that he or she considered "special." The types of help described by respondents spanned a broad range from heroic rescue to small daily acts of assistance, or courtesies. The majority, however, referred to enduring and personally costly forms of help such as helping care for an ill relative in one's own home, for several months to several years. This is a generation which has had a great deal of experience as major providers of informal support to others. Frequently, the special forms of help that respondents provided referred to assistance to parents or siblings early in their lives. Some mentioned assisting family members during the Great Depression. It is especially interesting to note that respondents vividly recalled these acts of altruism and that they held great salience for them even in their old age. These findings are consistent with evidence from earlier work which suggests that the elderly often engage in a life review (Butler, 1975)

and refer to early relations with parents as a salient aspect of their self-concepts (Kahana and Coe, 1969).

The second form of special assistance cited by a large proportion of respondents referred to provision of assistance to others who resided outside of their own home, during times of illness or medical emergency. Fifteen respondents provided examples of assisting ill persons with chores and medical treatments on an ongoing basis. An additional six provided household assistance to others. These examples often referred to current involvement in assisting neighbors or friends. An additional twenty respondents related single instances of assistance in a health crisis or illness. These included rescue behaviors such as calling an ambulance or doctor, obtaining medication, or calling the family of an ill resident. Once again, the examples tended to be more recent in nature, often referring to assistance provided by an older person to other elderly. Accordingly, it appears that illness represents the most important stimulus for special helping acts by older persons, and they comprise a very significant informal support network to one another when illness strikes. When all four aspects of caretaking and helping during times of illness and crises are combined, about one-half of the sample (N-56) who provides some form of special assistance to others were accounted for.

Salient forms of special assistance provided to others also included volunteer activities (N=5), provision of financial assistance (N=10), babysitting or child care activities (N=7), emotional, spiritual or religious help (N=8), heroic rescue (N=5), and other forms of assistance (N=9). One respondent cited driving disabled neighbors around, another purchased life insurance policies for thirteen family members. Someone cited volunteer activities as an alcohol crisis worker, while another elderly person advised

a doctor friend to seek psychiatric assistance, despite the risk of losing that person's friendship. With very few exceptions, these examples provided by respondents attested to risk-taking, courage, self-sacrifice or other special costs to assistance providers, which clearly went beyond trivial, routine, or normative forms of helping activity.

Seventeen individuals reported that they did not provide any remarkable or special forms of help to others. This is a very small proportion of the total sample, attesting to the fact that the vast majority of elderly persons view themselves as at least occasional providers of special assistance to others.

Rewards of Helping

In response to the question, "What do you consider to be the special rewards of helping?" about two-thirds of the same (N=66) said that they did indeed consider helping to have special rewards.

Of this group, the majority considered the rewards of giving to be intrinsic in nature. Specific intrinsic rewards of helping noted by respondents included perceived benefits to the recipient (N=11), a sense of usefulness or competence (N=4), and a sense of fulfilling religious obligations (N=2). One 86-year-old respondent noted that helping others "confirms one's own existence and integration."

A minority of respondents reported extrinsic rewards as the salient ones in helping behavior--and these respondents themselves were generally older or more needy than most. Specific forms of reciprocal help were mentioned by four respondents, and material payments were mentioned by one. Acknowledgement by others, gratitude, and a good reputation were noted by seven respondents as comprising rewards of helping others.

These findings provide a strong indication of the importance of altruistic motives for self-reported helping behavior by older persons. Thus, it appears that the majority engage in helping others primarily because of the beneficial outcomes to the recipient, or because of the psychological benefits they derive for so doing, rather than based on extrinsic rewards such as tangible forms of reciprocal helping, money or recognition. These findings raise questions about the universal applicability of an exchange model of helping to elderly providers of help.

Table 1

Percentages of Respondents Emitting Diverse Helping Acts
(from Modified Self-Report Altruism Scale)

Item	Response					Summary
	Never	Once	More than once	Often	Very often	(Once or More)
Looked in on sick	17.1	0	34.2	24.8	23.9	82.9
Gave Directions	17.9	2.6	35.0	27.4	17.1	82.1
Made Change	26.5	.9	35.0	29.1	8.5	73.0
Money to Charity	12.0	6.8	31.6	30.8	18.8	88.0
Money to Someone	40.9	11.3	37.4	8.7	1.7	59.1
Goods to Charity	25.6	15.4	35.9	11.1	12.0	74.4
Volunteer Work for Charity	51.3	3.4	19.7	6.8	18.8	48.7
Gave Blood	97.4	1.7	.9	-	-	2.6
Carried Belongings	31.6	5.1	35.9	18.8	8.5	68.3
Held Elevator	8.5	1.7	14.5	44.4	30.8	91.4
Let Ahead on Line	24.8	.9	39.8	20.4	14.2	75.3
Gave Lift in Car	42.9	3.8	12.4	21.9	19.0	57.1
Pointed out Undercharge	67.3	11.5	17.7	3.5	-	32.7
Lent Stranger Item of Value	83.6	1.7	9.5	3.4	1.7	16.3
Bought Card from Charity	39.3	18.8	25.6	9.4	6.8	60.6
Helped with Chores	69.8	6.0	17.2	2.6	4.3	30.1
Looked after Things	54.3	11.2	18.1	11.2	5.2	45.7
Helped Handicapped Cross Street	40.5	4.3	30.2	16.4	8.6	59.5
Offered Seat	58.8	7.0	26.3	4.4	3.5	72.7
Helped Acquaintance Move	72.6	9.7	17.7	-	-	27.4
Looked in on Friend or Neighbor	18.1	4.3	23.3	24.1	30.2	81.9
Gave Advice to Friend	25.9	5.2	31.0	19.8	18.1	74.1
Picked up things at Store	25.2	2.6	27.8	27.0	17.4	74.8
Babysat Free	67.5	2.6	17.1	6.0	6.8	32.5
Helped Neighbor w/Chores	56.9	5.2	19.8	9.5	8.6	43.1
Gave Emotional Support	9.5	5.2	33.6	29.3	22.4	90.5

REFERENCES

Adams, B. N. Kinship in an urban setting, 4th ed. Chicago: Markham, 1968.

Butler, R. Why survive? Chicago: Harper and Row, 1975.

Cantor, M. H. Life space and social support system of inner city elderly of New York. Gerontologist, 1975, 45: 23-27.

Harris, L. et al. The myth and reality of aging in America. National Council on the Aging, Washington, D.C., 1976.

Kahana, E. The roles of homes for the aged in meeting community needs: Final report. Wayne State University, Elderly Care Research Center, Detroit, Michigan, 1974.

Kahana, E. Service needs of the urban aged: perspectives of consumers, agencies and significant others. Paper presented at the Wayne State University-University of Michigan Institute of Gerontology Pro-Seminar, January, 1975.

Kahana, E. Intergenerational relations - perspectives of the grandparent generation. Paper presented at the annual meetings of the St. Louis Family and Children Services, St. Louis, Missouri, May, 1975.

Kahana, E. and Coe, R. M. Staff and self-conceptions of the institutionalized aged. Gerontologist, 1969, 9: 264-277.

Kahana, E. and Felton, B. Social context and personal needs: a study of Polish and Jewish aged. Journal of Social Issues, 1977, 33: 56-74.

Midlarsky, E. and Kahana, E. Helping by the elderly: it's nature, antecedents and outcomes. Final report - AARP Andrus Foundation project, 1983a.

Montgomery, J. E. The housing patterns of older people. Family Coordinator, 1972, 21: 37-46.

Robinson, B. and Thurnher, M. Taking care of aged parents: a family life in transition. Gerontologist, 1979, 19: 586-593.

Rosow, I. Social integration of the aged. New York: Free Press, 1967.

Rushton, J. P. Chrisjohn, R. D., and Fekken, G. C. The altruistic personality and the self-report altruism scale. Personality and Individual Differences, 1981, 2: 293-302.

Shanas, E. Family help patterns and social class in three countries. Journal of Marriage and Family, 1967, 29: 2.

Troll, L., Miller, S. and Atchley, R. Families in later life. Belmont, California: Wadsworthy, 1975.